## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10679833

| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |  |   |              |                                    |              |                  |       | SMALL ENTITY TYPE   |                        |       | OTHER THAN OR SMALL ENTITY |                        |
|---|--|---|--------------|------------------------------------|--------------|------------------|-------|---------------------|------------------------|-------|----------------------------|------------------------|
| TOTAL CLAIMS  |  |   | 13           |                                    |              |                  | -     | RATE                | FEE                    | 7     | RATE                       | . FEE                  |
| FOR   |  |   | NUMBER FILED |                                    | NUMB         | ER EXTRA         |       | BASIC FEE           | <del></del>            | ОЯ    | BASIC FEE                  |                        |
| TOTAL CHARGEABLE CLAIMS   |  |   | 「今 minus 20= |                                    | <b>.</b>     |                  |       | X\$ 9=              |                        | OR    | X\$18=                     |                        |
| INDEPENDENT CLAIMS  |  |   | 1 minus 3 =  |                                    |              |                  |       | X43=                |                        | OR    | X86=                       |                        |
| M   |  | NDENT CLAIM P                             | RESENT       |                                    |              |                  |       | +145=               |                        | OR    | +290=                      |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2              |  |   |              |                                    |              | ı                | TOTAL | 385                 | OR                     | TOTAL |                            |                        |
| 4   | CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)  CLAIMS HIGHEST  |   |              |                                    |              |                  |       | SMALL               | ENTITY                 | OR    | OTHER<br>SMALL             |                        |
| AMENDMENT A   |  | REMAINING<br>AFTER<br>AMENDMENT           |              | PAID F                             | BER<br>JUSLY | PRESENT<br>EXTRA |       | RATE                | ADDI-<br>TIONAL<br>FEE |       | RATE                       | ADDI-<br>TIONAL<br>FEE |
|   | Total  | . / 🗸                                     | Minus        | ** <u>~</u>                        | 0            |                  |       | X\$ 9=              |                        | OR    | X\$18=                     |                        |
| AM  | Independent  | * /                                       | Minus        |                                    | 2<br>CLAIM   | -                |       | X43=                |                        | OR    | X86=                       |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |  |   |              |                                    |              |                  |       | +145=               |                        | OR    | +290=                      |                        |
| (   |  |   |              |                                    |              |                  |       | TOTAL<br>ADDIT. FEE |                        | OR    | TOTAL<br>ADDIT. FEE        |                        |
|   |  | (Column 1)                                |              | (Colum                             |              | (Column 3)       |       |                     |                        |       |                            | ·                      |
| AMENDMENT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGHE<br>NUMB<br>PREVIO<br>PAID F  | ER<br>USLY   | PRESENT<br>EXTRA |       | RATE                | ADDI-<br>TIONAL<br>FEE |       | RATE                       | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus ·      | **                                 |              | =                |       | X\$ 9=              |                        | OR    | X\$18=                     |                        |
|   | Independent  | *   | Minus        | ***                                |              | 2                |       | X43=                |                        | OR    | X86=                       |                        |
|   | FINOT PRESE  | NTATION OF MU                             | LIPLE DEP    | ENDENT                             | CLAIM        |                  |       | +145=               |                        | OR    | ·+290=                     | ·                      |
|   |  |   |              |                                    |              |                  |       | TOTAL<br>DDIT. FEE  |                        | OR ,  | TOTAL<br>ODIT, FEE         |                        |
| (Column 1) (Column 2) (Column 3)  |  |   |              |                                    |              |                  |       |                     |                        |       |                            |                        |
| AMENDMENT C   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | ·            | HIGHE<br>NUMB<br>PREVIOU<br>PAID F | ER<br>JSLY   | PRESENT<br>EXTRA |       | RATE                | ADDI-<br>TONAL<br>FEE  |       | RATE                       | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus        | **                                 |              | <u>-</u> .       |       | X\$ 9=              |                        | OR    | X\$18=                     |                        |
|   | Independent  |   | Minus        | ***                                | l            | =                | I     | X43=                |                        |       | X86=                       |                        |
| لــــــــــــــــــــــــــــــــــــــ   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |              |                                    |              |                  |       |                     |                        | OR    |                            |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |  |   |              |                                    |              |                  |       |                     |                        | OR    | +290=<br>TOTAL             |                        |
| ***   | ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ****If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |              |                                    |              |                  |       |                     |                        |       |                            |                        |